

# Memorandum

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**To:** Roberta Thomas  
**From:** Mariana Hernandez, Oklahoma County Treasurer's Office  
**Re:** Employee Benefits (AffirmedRX)

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Employee Benefit checks to be considered for approval at the Commissioners meeting on June 24<sup>th</sup>, 2026 are as follow:

INVOICE # 6879

June 1<sup>st</sup>, 2026 through June 7<sup>th</sup>, 2026

<b>Oklahoma County Pharmacy Services</b>	<b>\$ 286,187.37</b>
<b>Prefunded Payment</b>	<b>(125,000.00)</b>
<b>TOTAL CLAIMS</b>	<b>\$ 161,187.37</b>

APPROVED on \_\_\_\_\_, 2026  
By the Board of County Commissioners

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATTEST:

\_\_\_\_\_  
Oklahoma County Clerk



**AffirmedRx**

10200 Forest Green Blvd Ste 112  
 Louisville, KY 40223  
 ar@affirmedrx.com



**AffirmedRx**  
 PUBLIC BENEFIT CORPORATION

**INVOICE**

BILL TO  
 Oklahoma County  
 320 Robert S Kerr Avenue  
 Oklahoma City, OK 73102

INVOICE 6879  
 DATE 06/08/2026  
 DUE DATE 06/11/2026

DATE	SERVICES	DESCRIPTION	QTY	RATE	AMOUNT
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-022	1	172.76	172.76
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-040	1	43,456.21	43,456.21
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-050	1	28.42	28.42
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-060	1	9,729.72	9,729.72
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-080	1	0.00	0.00
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-100	1	22,762.57	22,762.57
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-140	1	17,311.74	17,311.74
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-150	1	1,205.43	1,205.43
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-160	1	25,073.99	25,073.99
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-170	1	1,940.09	1,940.09
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-180	1	12,497.83	12,497.83
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-200	1	85.89	85.89
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-220	1	5,034.25	5,034.25
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-230	1	2,513.12	2,513.12

Please ACH your payment to:

Old National Bank  
 ABA# 086300012  
 Account# 118169534  
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06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-240	1	1,740.57	1,740.57
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-250	1	4,961.16	4,961.16
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-270	1	94.80	94.80
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-310	1	1,055.15	1,055.15
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-330	1	10,589.25	10,589.25
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-410	1	56.46	56.46
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-420	1	295.68	295.68
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-421	1	1,412.69	1,412.69
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-423	1	69,410.86	69,410.86
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-620	1	1,358.81	1,358.81
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-630	1	0.00	0.00
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-801	1	1,980.99	1,980.99
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-802	1	6,448.28	6,448.28
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-803	1	6,606.00	6,606.00
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-970	1	-1.58	-1.58
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-980	1	1,058.17	1,058.17
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-COC	1	0.00	0.00
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-RET	1	35,332.21	35,332.21
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-RETS	1	1,974.04	1,974.04
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-SUA	1	1.81	1.81
06/08/2026	Pharmacy Services	Oklahoma County Health Benefit Plan-	1	0.00	0.00

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SUR

06/08/2026

Pharmacy Services Apply Prefund

1

-125,000.00

-125,000.00

Please pay via ACH.  
Pharmacy Cost for 6/1/26 - 6/7/26

BALANCE DUE

**\$161,187.37**

Please ACH your payment to:

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